10000107135

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EXAMINER

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SECRETARY OF STATE

COVER LETTER

#

TO: Registration Section Division of Corporations		
SUBJECT: PROVIDENCE PLACE ON THE ISLAND, LLC. (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
STEVE KEPECZ (Name of Person)		
PROVIDENCE PLACE ON THE ISLAND, LLC. (Firm/Company)		
127 TAMPA AVENUE EAST #3 (Address)		
VENìCE, FL 34285 →		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
STEVE KEPECZ at (_941) 376-6411		
(Name of Person) (Area Code & Daytime Telephone Number)		
•		
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
✓ \$25 Filing Fee		

INHS18 (5/08)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

,	
1. Name of the limited liability company: PROVIDEN	CE PLACE ON THE ISLAND, LLC.
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 127 TAMPA AVENUE EAST #3 VENICE, FL 34285
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
11/3/06	L06000107135
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	TAMMY VELLUCCI
Registered Office Address:	127 TAMPA AVENUE EAST SUITE 3 VENICE, FL 34285
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	STEVE KEPECZ
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	127 TAMPA AVENUE EAST SUITE 3
	VENICE, FL 34285 ■ ,FL
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) (Printed or typed name of signee) I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the pream familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	ext address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the limited of the limited of organization or the operating agreement of the limited of organization or the operating agreement of the limited of organization or the operating agreement of the limited of the
(Signature of Registered Agent)	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00